	1042		. /								
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PATENT APPLICATION FEE DETERMINATION Substitute for Form PTO-878	ON RECORD AG	10/65891	<u> </u>								
CLAIMS AS FILED - PART I (Cotuma 2)	SMALL ENTITY O	OTHER THAN SMALL ENTITY									
FOR MUMBER FILED MUMBER EXTRA	RATE FEE	RATE FEE	J								
TOTAL CLAUS	ه ا	1787									
(ST CFR (18(2)) calnus 20 •	x • o	x = 1/02 C									
(37 CFR L18(N)) 6 calcus 3 • •	×4 0	xe 1/08 0	20								
MATPLE DEPENDENT CLAIM PRESENT (87 CFR 1.16(4))	<u>•• </u>	100	1								
* If the difference in column 1 is less than zero, enter 10° in column 2. CLAIMS AS AMENDED - PART II	TOTAL	TOTAL LESSO C	2								
(Column 1) . (Column 2) (Column 3)	SMALL ENTITY O	R OTHER THAN SMALL ENTITY									
REMAINING MAJOCO DEPRENT	RATE ADDITIONAL FEE ()	RATE ADDI-									
APTER AMERICALENT PREVIOUSLY EXTRA AMERICALENT PAID FOR PAID FOR STATE OF S	x / or	1/2/00									
A Minus - 5	x / or	17/5									
ARIT PRESENTATION OF MARTIPLE DEPONDENT CLASS. (07 CM: L1660)	+ _ • / O OF		0								
(Cotumn 2) (Cotumn 3)	ADD'L FEE	ADDL FEE /400	X								
CLAIMS HUGHEST PRESENT	RATE ADDI-	RATE ADGI-	,								
AFIER PREVIOUSLY PAD FOR DISTRAL PREVIOUSLY PAD FOR STORE ST	TIONAL	TIONAL FEE	•								
Z brichendert of S Minus on 5 =	X										
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (DT CFR L1640)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0										
5/2/10	TOTAL ADD'L FEE OR	TOTAL ADDITION OF THE PROPERTY	\mathcal{L}								
CASAS HCHEST			•								
AFTER PREVIOUSLY EXTRA	RATE ADDI- TICHAL/	RATE ADDI-	•								
Total cron.cmp	X8 OR	x									
▎ <mark>▓</mark> ┞ ┈┈┈╙┈ ╬┈┈┈┈	X 9 OR	xe									
FRET PRESENTATION OF MULTIPLE DEPENDENT CLAIM (67 CPR 1.18(41)	0R	Vi //	_								
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "righest Number Previously Paid Eor" IN THIS SPACE is less than 20, enter "20". *** If the "righest Number Previously Paid For" IN THIS SPACE is less than 30, enter "20".											
This collection of intermeters are resident in the second by 3 FER and Second											
including gathering, preparing, and extiniting the completed application form to the USPTO. Time will very depending upon the included case, Any comments											
on the amount of time you require to complete this form and/or suggestion form to the USPTO. Three will very depending upon the individual case. Any comments and Trademark Office, U.S. Department of Communes, P.O. Box 1459, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Petents, P.O. Box 1459, Alexandria, VA 22313-1450,											

V						Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003										7/		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL TYPE	ENTITY	OR	OTHER SMALL		
TOTAL CLAIMS		29					RATE	FEE	7	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE 375.0		OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			29 minus 20=		• 0			X\$ 9=		OR	X\$18=	162
INDEPENDENT CLAIMS 5				inus 3 =	us 3 = * 2			X42= /		OR	X84=	168
MULTIPLE DEPENDENT CLAIM PRESENT							+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							l	TOTA	100	OR	TOTAL	1080
Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR	OTHER SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER		HIGH NUMI PREVIO	EST BER	(Column 3)		RATE	ADDI-	7	RATE	ADDI- TIONAL
	Total	AMENDMENT .	Minus	PAID		EXTRA		X\$ 9=	FEE	-	X\$18=	FEE /
MEN	Independent	. 8	Minus	***	Z	= 1		X42=	+ /	OR	X84=	6 14
٧	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		-	A4Z=	1/2	OR	A04=	
							L	+140=	_///	OR	+280=	
		(Oakses 4)		.	_		A	TOTA DDIT. FE		OR	TOTAL ADDIT. FEE	300
		(Column 1) CLAIMS		(Colun	EST	(Column 3)	ı		ADDI-	,		4551
ENT B		REMAINING AFTER AMENDMENT		PREVICE PAID I	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE
MENDMENT	Total	±	Minus	**		=		X\$ 9=		ОЯ	X\$18=	
	Independent FIRST PRESE	* NTATION OF MU	Minus	*** PENDENT	CI AIM]=		X42=		OR	X84=	
				2,136,11	OD divi	<u> </u>	' [+140=		OR	+280=	; :
							A	TOTA DDIT. FE		OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS		(Colum		(Column 3)	_					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NO	Total	•	Minus	##		Ξ		X\$ 9=		OR	X\$18=	, ce
ME	Independent	*	Minus	***		±	┟	X42=	-	1	X84=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	PENDENT	CLAIM		┞	7.42-		OR	7042	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3							OR	+280= TOTAL				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
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